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	J_/Harmuth-Reg.	No.	33,896 (ositor's name)
Kon	10116		(Signature)
August	2 , 2004		(Date)

FILING DATE FIRST NAMED INVENTOR APPLICATION NO. ATTORNEY DOCKET NO. CONFIRMATION NO. 09/988,863 11/21/2001 Ruth Meissner MO6761 LEA 35,018 9206

TITLE OF INVENTION: PLANT PHOSPHOMEVALONATE KINASES

EXAMINER ART UNIT CLASS-SUBCLASS TUNG, JOYCE 1637 435-006000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Tee Address form PTO/SB/122) attached. Tee Address form PTO/SB/122 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment been previously submitted to the USPTO or a being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment been previously submitted to the USPTO or a being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Bayer Aktiengesellschaft D-51368 Leverkusen, Germany Please check the appropriate assignee category or categories (will not be printed on the patent); Individual Corporation or other private group entity I	APPLN. TYPE SMALL ENTITY		ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
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